Arizona Department of Economic Security, Division of Developmental Disabilities Schedule 1: SFY04 Phase-In Rates Introduction

Purpose of This Schedule

Schedule 1 contains the rates that will be used in Fiscal Year 2004. Qualified Vendors shall use one of three rates (step-up, adopted or step-down) for each service when billing the Division, based on the following criteria:

- □ If during Fiscal Year 2003, the Qualified Vendor was reimbursed by the Division at an average paid unit rate lower than or equal to the step-up rate for a given service, the Qualified Vendor shall bill the Division at the step-up rate for that service during Fiscal Year 2004.
- □ If during Fiscal Year 2003, the Qualified Vendor was reimbursed by the Division at an average paid unit rate higher than the step-up rate for a given service and lower than or equal to the adopted rate for the same service, the Qualified Vendor shall bill the Division at the adopted rate for that service during Fiscal Year 2004.
- If during Fiscal Year 2003, the Qualified Vendor was reimbursed by the Division at an average paid unit rate higher than or equal to the adopted rate for a given service and lower than the step-down rate for the same service, the Qualified Vendor shall bill the Division at the adopted rate for that service during Fiscal Year 2004.
- □ If during Fiscal Year 2003, the Qualified Vendor was reimbursed by the Division at an average paid unit rate higher than or equal to the step-down rate for a given service, the Qualified Vendor shall bill the Division at the step-down rate for that service during Fiscal Year 2004.

Independent Providers

This schedule does not list rates for independent providers (non-agency rates). These rates will be released in the fall of 2003 after the development and administration of the statewide individual consumer level of need assessment process and the adoption of rate modifiers. Until that time independent providers will continue to be compensated pursuant to the independent rate schedule in the district where the consumer resides. After the statewide rates for independent providers (non-agency rates) are published, independent providers, whether or not they are Qualified Vendors, will receive the applicable statewide independent provider rate as modified by the individual consumer level of need assessment.

Page 1 of 21 April 7, 2003

Rates

- 1. For the Home-Based Services, the average paid unit rate will be determined for each Qualified Vendor by the Division based on the units billed by the Qualified Vendor and paid by the Division for Fiscal Year 2003, from the beginning of the fiscal year until February 7, 2003 and appearing on the Division's automated systems. In determining the average rate for each Qualified Vendor, the Division will not consider any claims that have a rate per unit of service that is below the single client floor rate established for Fiscal Year 2003 pursuant to the provider increase process established for the year.
- 2. For Qualified Vendors that did not have a contract with the Division to provide a particular service in Fiscal Year 2003, the rate that will be used for that particular service in Fiscal Year 2004 will be the adopted rate.

Unit of Service

- 1. The basis of payment for all Home-Based Services except for Respite, Continuous is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
- If services were provided for 65 minutes, bill for 1 hour.
- If services were provided for 68 minutes, bill for 1.25 hour.
- If services were provided for 50 minutes, bill for .75 hour.
- 2. If the Qualified Vendor provides respite for more than 13 hours in one day, this is considered to be Respite, Continuous. One unit of Respite, Continuous equals one day (13 or more hours in a 24-hour period) of direct service time. A Qualified Vendor billing for Respite, Continuous will bill for the appropriate number of days of service and will include the actual cumulative hours of service provided on the billing document as required by the Division.
- 3. In no event will more than three consumers receive the same service with a single direct service staff person at the same time.

Page 2 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	Bel Leve Th	Y03 Rate ow This I, Move to is Level -Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
Attendent 0	Care						
ATC	Attendant Care	Client Hour	1	9	313.04	\$13.16	\$13.55
ATC	Attendant Care	Client Hour	2		\$8.15	\$8.22	\$8.47
ATC	Attendant Care	Client Hour	3		\$6.52	\$6.58	\$6.78
Habilitation	n, Community Protection and Treatm	ent Hourly					
HPH	Habilitation, Community Protection and Treatment Hourly	Client Hour	1	\$	513.41	\$17.64	\$31.76
HPH	Habilitation, Community Protection and Treatment Hourly	Client Hour	2	:	\$8.38	\$11.03	\$19.85
HPH	Habilitation, Community Protection and Treatment Hourly	Client Hour	3	:	\$6.70	\$8.82	\$15.88
Habilitation	n, Support						
HAH	Habilitation, Support	Client Hour	1	9	316.09	\$16.80	\$19.14
HAH	Habilitation, Support	Client Hour	2	\$	10.06	\$10.50	\$11.96
HAH	Habilitation, Support	Client Hour	3	;	\$8.05	\$8.40	\$9.57
Housekeep	ing						
HSK	Housekeeping	Client Hour	1	\$	512.10	\$12.13	\$12.21
Respite, sh	ort-term						
RSP	Respite, short-term	Client Hour	1	\$	12.70	\$12.90	\$13.55
RSP	Respite, short-term	Client Hour	2		\$7.94	\$8.06	\$8.47
RSP	Respite, short-term	Client Hour	3		\$6.35	\$6.45	\$6.78
Respite, co	ontinuous						
RSP	Respite, continuous	Day	1	\$	155.33	\$157.74	\$165.75
RSP	Respite, continuous	Day	2	\$	97.08	\$98.59	\$103.59
RSP	Respite, continuous	Day	3	\$	377.67	\$78.87	\$82.88

Page 3 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
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Independent Living Services

HAI	Habilitation, Individually Designed	Client Hour	1	\$16.10	\$16.97	\$19.87
	Living Arrangement					

Unit of Service for Habilitation, Individually Designed Living Arrangement

If the Qualified Vendor provides this service with a single direct service staff person to multiple consumers at the same time, the basis of payment for each consumer will be the total direct service time divided by the total number of consumers. The rate for this service will be the per unit rate:

- If one direct service staff person provides this service for one hour of direct service time to two consumers at the same time, the Qualified Vendor shall bill the Division .5 units of service for each consumer at the published rate.
- If one direct service staff person provides this service for two hours of direct service time to two consumers at the same time, the Qualified Vendor shall bill the Division one unit of service for each consumer at the published rate.

The rate is either new or was changed from the January 21, 2003 release

Page 4 of 21 April 7, 2003

Rates

- 1. The average paid unit rate for the Day Treatment and Training Services provided by the day treatment and training provider will be calculated for each Qualified Vendor by the Division based on the units billed by the Qualified Vendor and paid by the Division for Fiscal Year 2003, from the beginning of the fiscal year until February 7, 2003 and appearing on the Division's automated systems. In determining the average rate for each Qualified Vendor, the Division will not consider any claims that have a rate per unit of service that is below the floor rate established for Fiscal Year 2003 pursuant to the provider increase process established for that year. The calculation of the average paid unit rate for Day Treatment and Training, Child (After-School) and Day Treatment and Training, Child (Summer) will be calculated by as a single rate by taking all Day Treatment and Training, Child services billed. Similarly, the average paid unit rate for Day Treatment and Training, Adult will be calculated as a single rate.
- 2. For Qualified Vendors that did not have a contract with the Division to provide a particular service in Fiscal Year 2003, the rate that will be used for that particular service in Fiscal Year 2004 will be the adopted rate.

Unit of Service

- 1. The basis of payment for Day Treatment and Training Services is one hour (60 minutes) of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and can be verified by consumer attendance records and includes transportation time with a consumer in support of program activities. When billing, the Qualified Vendor should round units of service to the nearest 15-minute increment, as illustrated in the examples below:
- If services were provided for 65 minutes, bill for 1 hour.
- If services were provided for 68 minutes, bill for 1.25 hour.
- If services were provided for 50 minutes, bill for 0.75 hour.
- 2. Absences are those situations where a consumer is not in the Day Treatment and Training program for a day but is expected to return. Consumer absences will not result in a change in an authorization or rate. The Qualified Vendor shall notify the DDD Program Administrator/Manager or designee of absences greater than seven consecutive days and shall not continue to bill the Division for the absent consumer without specific authorization.

If the consumer is not in the Qualified Vendor's facility, but is in the hospital or skilled nursing facility, the Qualified Vendor shall not bill the Division for this consumer, even if the consumer is not in the Qualified Vendor's facility for less than seven days.

3. If the consumer permanently stops attending the Qualified Vendor's facility, then the Qualified Vendor shall notify the DDD Program Administrator/Manager or designee. The Qualified Vendor shall not bill the Division for vacancies.

Page 5 of 21 April 7, 2003

Service Code	Description	Unit of Service	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)				
Day Treatm	Day Treatment and Training, Adult								
DTA	As of the release of Amendment Number 1, the Division has not completed its review of the Day Treatment and Training, Adult rates. However,								
Day Treatm	ent and Training, Children								
DTC	Day Treatment and Training, Children (After-School)	its review of the Day Treatment and Training, Children rates. However, existing providers are encouraged to apply for this service so that payme							
	To +								
DTC	Day Treatment and Training, Children (Summer)		subsequent RFQVA a	•					

Modified Rates

Rural

The Division established a separate rate for this service in the rural areas of the state. This modified rate has a premium over the standard rate for this service. The Qualified Vendor shall bill the Division this modified rate only after it receives authorization from the DDD Program Administrator/Manager or designee. The general guideline for authorizing the modified rate for rural areas is that the potential client base of the program size has fewer than 20 consumers in a 40 mile radius.

DTA	Rural Day Treatment and Training, Adult	As of the release of Amendment Number 1, the Division has not completed its review of the Rural Day Treatment and Training, Adult rates. However, existing providers are encouraged to apply for this service so that payment authorizations can be processed before July 1, 2003. The new rates will be released in a subsequent RFQVA amendment.
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Page 6 of 21 April 7, 2003

			Ī	If SFY03 Rate		IF SFY03 Rate
Service		Unit of		Below This	Adopted	Above This
	Description			Level, Move to		Level, Move to
Code	-	Service		This Level	Rate	This Level (Step-
				(Step-Up Rate)		Down Rate)

Behaviorally or Medically Intense

The Division established a separate rate for this service to behaviorally or medically intense consumers. This modified rate has a premium over the standard rate for this service. The Qualified Vendor shall bill the Division this modified rate only after it receives authorization from the DDD Program Administrator/Manager or designee. The general guideline for authorizing the modified rate for behaviorally or medically intense consumers is that the consumer's need for supervision and hands-on instructions is exceptional, and that failure to supply the one-to-one staffing would be severely detrimental to other consumers participating in the program.

DTA	Behaviorally or Medically Intense Day Treatment and Training, Adult	As of the release of Amendment Number 1, the Division has not completed its review of the Behaviorally or Medically Intense Day Treatment and Training, Adult rates. However, existing providers are encouraged to apply for this service so that payment authorizations can be processed before July 1, 2003. The new rates will be released in a subsequent RFQVA amendment.
DTC	Behaviorally or Medically Intense Day Treatment and Training, Children (After- School)	As of the release of Amendment Number 1, the Division has not completed its review of the Behaviorally or Medically Intense Day Treatment and Training, Children rates. However, existing providers are encouraged to
DTC	Behaviorally or Medically Intense Day Treatment and Training, Children (Summer)	- apply for this service so that payment authorizations can be processed before July 1, 2003. The new rates will be released in a subsequent RFQVA amendment.

Page 7 of 21 April 7, 2003

Rates

- 1. For the Developmental Home services:
- 1.1 The average paid unit rate will be determined for each Qualified Vendor by the Division based on the units billed by the Qualified Vendor and paid by the Division for Fiscal Year 2003, from the beginning of the fiscal year until February 7, 2003 and appearing on the Division's automated systems. In determining the average rate for each Qualified Vendor, the Division will not consider any claims that have a rate per unit of service that is below the single client floor rate established for Fiscal Year 2003 pursuant to the provider increase process established for the year.
- 1.2 For Qualified Vendors that did not have a contract with the Division to provide a particular service in Fiscal Year 2003, the rate that will be used for that particular service in Fiscal Year 2004 will be the adopted rate.
- 2. For the Group Home Habilitation services:
- 2.1 The average rate will be determined by service site, with the calculated staff hour rate contained in the contract amendments relating to the Fiscal Year 2003 provider rate increase effective July 1, 2002, or any subsequent amendment between the Applicant and the Division agreed to in writing no later than November 1, 2002. Applicants should refer to the "Combined 4.0 and 5.5 for HABILITATION, Group Home" in their current contract. The calculated staff hour rate is the staff hour rate that was used in the calculation that produced the daily rate contained in the column on this document labeled "Rate Eff 7/1/02."
- 2.2. If the Qualified Vendor adds new sites not previously in contract, the adopted rate will be used (i.e., not the step-up rate or the step-down rate).

Unit of Service

- 1. For the Developmental Home services, one unit of service equals one day (24 hours) of service time. A day begins at midnight and ends at 11:59 p.m. Unit of service includes transportation time spent with consumers during daily activities.
- 2. For the Group Home services, one unit of service equals one hour (60 minutes) of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and can be verified by consumer attendance records and includes transportation time spent with consumers during daily activities. This unit of service is converted to a daily rate for billing purposes.
- 3. For Room and Board, All Group Home, one unit equals one day (24 hours). If the consumer is a resident at 11:59 p.m. on a given day, the Qualified Vendor may bill that day for that consumer.

Page 8 of 21 April 7, 2003

Service Code	Description	Unit of Service	District	Contracted Capacity	Actual Occupancy	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
Developmer	ntal Home Services							
HBA/HBC	Habilitation, Vendor Supported Developmental Home (Child and Adult)	Day	AII	N/A	N/A	N/A	\$109.75	\$131.14
RRB	Room and Board, Vendor Supported Developmental Home (Child and Adult)	Day	All	N/A	N/A	N/A	\$11.60	\$13.58
Group Home	e Services*							
HPD	Habilitation, Community Protection and Treatment Group Home*	Staff Hour	All	N/A	N/A	\$16.42	\$17.64	\$21.73
HAB	Habilitation, Group Home*	Staff Hour	All	N/A	N/A	\$15.59	\$15.87	\$16.78
HAN	Habilitation, Nursing Supported Group Home*	Nursing Sup	ported Gronent autho	oup Home rates rizations can be	s. However, exis	on has not completed ting providers are end ore July 1, 2003. The	couraged to a	oply for this service

ROOM and Board, All Group Homes

RRB ROOM and Board, All Group Homes

RRB	Room and Board, All Group Homes	Day	1	1	1
RRB	Room and Board, All Group Homes	Day	1	2	1
RRB	Room and Board, All Group Homes	Day	1	2	2
RRB	Room and Board, All Group Homes	Day	1	3	1
RRB	Room and Board, All Group Homes	Day	1	3	2
RRB	Room and Board, All Group Homes	Day	1	3	3
RRB	Room and Board, All Group Homes	Day	1	4	1
RRB	Room and Board, All Group Homes	Day	1	4	2
RRB	Room and Board, All Group Homes	Day	1	4	3
RRB	Room and Board, All Group Homes	Day	1	4	4
RRB	Room and Board, All Group Homes	Day	1	5	1
RRB	Room and Board, All Group Homes	Day	1	5	2
RRB	Room and Board, All Group Homes	Day	1	5	3
RRB	Room and Board, All Group Homes	Day	1	5	4
RRB	Room and Board, All Group Homes	Day	1	5	5
RRB	Room and Board, All Group Homes	Day	1	6	1
RRB	Room and Board, All Group Homes	Day	1	6	2
RRB	Room and Board, All Group Homes	Day	1	6	3
RRB	Room and Board, All Group Homes	Day	1	6	4
RRB	Room and Board, All Group Homes	Day	1	6	5
RRB	Room and Board, All Group Homes	Day	1	6	6

\$35.15	\$35.15	\$35.15
\$37.98	\$37.98	\$37.98
\$22.78	\$22.78	\$22.78
\$46.49	\$46.49	\$46.49
\$27.00	\$27.00	\$27.00
\$20.50	\$20.50	\$20.50
\$50.70	\$50.70	\$50.70
\$29.08	\$29.08	\$29.08
\$21.88	\$21.88	\$21.88
\$18.27	\$18.27	\$18.27
\$59.14	\$59.14	\$59.14
\$33.29	\$33.29	\$33.29
\$24.68	\$24.68	\$24.68
\$20.37	\$20.37	\$20.37
\$17.78	\$17.78	\$17.78
\$62.96	\$62.96	\$62.96
\$35.19	\$35.19	\$35.19
\$25.94	\$25.94	\$25.94
\$21.31	\$21.31	\$21.31
\$18.53	\$18.53	\$18.53
\$16.68	\$16.68	\$16.68

Page 9 of 21 April 7, 2003

Service Code	Description	Unit of Service	District	Contracted Capacity	Actual Occupancy	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
RRB	Room and Board, All Group Homes	Dav	2	1	1	\$30.95	\$30.95	\$30.95
RRB	Room and Board, All Group Homes	Day	2	2	1	\$33.85	\$33.85	\$33.85
RRB	Room and Board, All Group Homes	Dav	2	2	2	\$20.72	\$20.72	\$20.72
RRB	Room and Board, All Group Homes	Day	2	3	1	\$41.64	\$41.64	\$41.64
RRB	Room and Board, All Group Homes	Day	2	3	2	\$24.58	\$24.58	\$24.58
RRB	Room and Board, All Group Homes	Dav	2	3	3	\$18.89	\$18.89	\$18.89
RRB	Room and Board, All Group Homes	Day	2	4	1	\$45.26	\$45.26	\$45.26
RRB	Room and Board, All Group Homes	Dav	2	4	2	\$26.36	\$26.36	\$26.36
RRB	Room and Board, All Group Homes	Dav	2	4	3	\$20.06	\$20.06	\$20.06
RRB	Room and Board, All Group Homes	Dav	2	4	4	\$16.91	\$16.91	\$16.91
RRB	Room and Board, All Group Homes	Day	2	5	1	\$52.52	\$52.52	\$52.52
RRB	Room and Board, All Group Homes	Dav	2	5	2	\$29.98	\$29.98	\$29.98
RRB	Room and Board, All Group Homes	Dav	2	5	3	\$22.47	\$22.47	\$22.47
RRB	Room and Board, All Group Homes	Dav	2	5	4	\$18.71	\$18.71	\$18.71
RRB	Room and Board, All Group Homes	Dav	2	5	5	\$16.46	\$16.46	\$16.46
RRB	Room and Board, All Group Homes	Day	2	6	1	\$55.81	\$55.81	\$55.81
RRB	Room and Board, All Group Homes	Dav	2	6	2	\$31.62	\$31.62	\$31.62
RRB	Room and Board, All Group Homes	Dav	2	6	3	\$23.55	\$23.55	\$23.55
RRB	Room and Board, All Group Homes	Dav	2	6	4	\$19.52	\$19.52	\$19.52
RRB	Room and Board, All Group Homes	Day	2	6	5	\$17.10	\$17.10	\$17.10
RRB	Room and Board, All Group Homes	Day	2	6	6	\$15.49	\$15.49	\$15.49
						7.57.5	*************************************	V .5
RRB	Room and Board, All Group Homes	Day	3	1	1	\$35.78	\$35.78	\$35.78
RRB	Room and Board, All Group Homes	Day	3	2	1	\$39.13	\$39.13	\$39.13
RRB	Room and Board, All Group Homes	Day	3	2	2	\$23.36	\$23.36	\$23.36
RRB	Room and Board, All Group Homes	Day	3	3	1	\$47.79	\$47.79	\$47.79
RRB	Room and Board, All Group Homes	Day	3	3	2	\$27.65	\$27.65	\$27.65
RRB	Room and Board, All Group Homes	Day	3	3	3	\$20.94	\$20.94	\$20.94
RRB	Room and Board, All Group Homes	Day	3	4	1	\$52.22	\$52.22	\$52.22
RRB	Room and Board, All Group Homes	Day	3	4	2	\$29.84	\$29.84	\$29.84
RRB	Room and Board, All Group Homes	Day	3	4	3	\$22.38	\$22.38	\$22.38
RRB	Room and Board, All Group Homes	Day	3	4	4	\$18.65	\$18.65	\$18.65
RRB	Room and Board, All Group Homes	Day	3	5	1	\$60.86	\$60.86	\$60.86
RRB	Room and Board, All Group Homes	Day	3	5	2	\$34.15	\$34.15	\$34.15
RRB	Room and Board, All Group Homes	Day	3	5	3	\$25.25	\$25.25	\$25.25
RRB	Room and Board, All Group Homes	Day	3	5	4	\$20.80	\$20.80	\$20.80
RRB	Room and Board, All Group Homes	Day	3	5	5	\$18.13	\$18.13	\$18.13

Page 10 of 21 April 7, 2003

Service Code	Description	Unit of Service	District	Contracted Capacity	Actual Occupancy	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
RRB	Room and Board, All Group Homes	Day	3	6	1	\$64.90	\$64.90	\$64.90
RRB	Room and Board, All Group Homes	Day	3	6	2	\$36.16	\$36.16	\$36.16
RRB	Room and Board, All Group Homes	Day	3	6	3	\$26.58	\$26.58	\$26.58
RRB	Room and Board, All Group Homes	Day	3	6	4	\$21.79	\$21.79	\$21.79
RRB	Room and Board, All Group Homes	Day	3	6	5	\$18.92	\$18.92	\$18.92
RRB	Room and Board, All Group Homes	Day	3	6	6	\$17.00	\$17.00	\$17.00
RRB	Room and Board, All Group Homes	Day	4, 5, 6	1	1	\$29.80	\$29.80	\$29.80
RRB	Room and Board, All Group Homes	Dav	4, 5, 6	2	1	\$32.51	\$32.51	\$32.51
RRB	Room and Board, All Group Homes	Day	4, 5, 6	2	2	\$20.05	\$20.05	\$20.05
RRB	Room and Board, All Group Homes	Day	4, 5, 6	3	1	\$39.80	\$39.80	\$39.80
RRB	Room and Board, All Group Homes	Day	4, 5, 6	3	2	\$23.66	\$23.66	\$23.66
RRB	Room and Board, All Group Homes	Day	4, 5, 6	3	3	\$18.27	\$18.27	\$18.27
RRB	Room and Board, All Group Homes	Day	4, 5, 6	4	1	\$41.52	\$41.52	\$41.52
RRB	Room and Board, All Group Homes	Day	4, 5, 6	4	2	\$24.50	\$24.50	\$24.50
RRB	Room and Board, All Group Homes	Day	4, 5, 6	4	3	\$18.82	\$18.82	\$18.82
RRB	Room and Board, All Group Homes	Day	4, 5, 6	4	4	\$15.98	\$15.98	\$15.98
RRB	Room and Board, All Group Homes	Day	4, 5, 6	5	1	\$46.41	\$46.41	\$46.41
RRB	Room and Board, All Group Homes	Day	4, 5, 6	5	2	\$26.93	\$26.93	\$26.93
RRB	Room and Board, All Group Homes	Day	4, 5, 6	5	3	\$20.43	\$20.43	\$20.43
RRB	Room and Board, All Group Homes	Day	4, 5, 6	5	4	\$17.18	\$17.18	\$17.18
RRB	Room and Board, All Group Homes	Day	4, 5, 6	5	5	\$15.24	\$15.24	\$15.24
RRB	Room and Board, All Group Homes	Day	4, 5, 6	6	1	\$48.74	\$48.74	\$48.74
RRB	Room and Board, All Group Homes	Day	4, 5, 6	6	2	\$28.08	\$28.08	\$28.08
RRB	Room and Board, All Group Homes	Day	4, 5, 6	6	3	\$21.20	\$21.20	\$21.20
RRB	Room and Board, All Group Homes	Day	4, 5, 6	6	4	\$17.75	\$17.75	\$17.75
RRB	Room and Board, All Group Homes	Day	4, 5, 6	6	5	\$15.69	\$15.69	\$15.69
RRB	Room and Board, All Group Homes	Day	4, 5, 6	6	6	\$14.31	\$14.31	\$14.31

Incontinence Supplies and Nutritional Supplements

Incontinence supplies and/or nutritional supplements shall be billed separately. These modifiers will be approved by the Division on a case-by-case basis, and the Qualified Vendor will be paid for these expenses in addition to the per diem rate and only for those residents that require them.

Nutritional Supplement Modifier

Unknown Nutritional Supplement	Day	All	N/A	N/A	N/A	\$4.00	N/A
Incontinence Supplies Modifier							
incontinence Supplies Modifier							

The rate is either new or was changed from the January 21, 2003 release

Page 11 of 21 April 7, 2003

Rates

- 1. For Home Health Aide and Nursing Services:
- 1.1 The average paid unit rate will be determined for each Qualified Vendor by the Division based on the units billed by the Qualified Vendor and paid by the Division for Fiscal Year 2003, from the beginning of the fiscal year until February 7, 2003 and appearing on the Division's automated systems. In determining the average rate for each Qualified Vendor, the Division will not consider any claims that have a rate per unit of service that is below the single client floor rate established for Fiscal Year 2003 pursuant to the provider increase process established for the year.
- 1.2 For Qualified Vendors that did not have a contract with the Division to provide a particular service in Fiscal Year 2003, the rate that will be used for that particular service in Fiscal Year 2004 will be the adopted rate.
- 2. For Therapies:
- 2.1 There will be no average rate determined, in as much as the step-up, step-down, and adopted rate are all equal.
- 2.2 If the Qualified Vendor provides this service, other than evaluation, to a consumer within the distance specified in the published rate schedule, the Qualified Vendor shall bill the Division the rate that corresponds to the traveled distance.

Unit of Service

- 1. For Home Health Aide and Nursing Services:
- 1.1 The basis of payment for all Services except for Nursing, Continuous is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
- If services were provided for 65 minutes, bill for 1 hour.
- If services were provided for 68 minutes, bill for 1.25 hour.
- If services were provided for 50 minutes, bill for .75 hour.
- 1.2 If the Qualified Vendor provides nursing for more than 16 hours in one day, this is considered to be Nursing, Continuous. One unit of Nursing, Continuous equals one day (16 or more hours in a 24-hour period) of direct service time. A Qualified Vendor billing for Nursing, Continuous will bill for the appropriate number of days of service and will include the actual cumulative hours of service provided on the billing document as required by the Division.
- 2. For Therapies:
- 2.1 One unit of evaluation equals one visit for evaluation.
- 2.2 The basis of payment for this service other than evaluation is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
- If services were provided for 65 minutes, bill for 1 hour.
- If services were provided for 68 minutes, bill for 1.25 hour.
- If services were provided for 50 minutes, bill for 0.75 hour.
- 3. In no event will more than three consumers receive the same service with a single direct service staff person at the same time.

Page 12 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
Home Healt	h Aide					
HHA	Home Health Aide	Client Hour	1	\$15.13	\$15.55	\$16.96
HHA	Home Health Aide	Client Hour	2	\$9.45	\$9.72	\$10.60
ННА	Home Health Aide	Client Hour	3	\$7.56	\$7.77	\$8.48
Nursing, sh	ort-term					
NHx	Nursing, short-term	Client Hour	1	\$35.00	\$35.00	\$53.15
NHx	Nursing, short-term	Client Hour	2	\$21.88	\$21.88	\$33.22
NHx	Nursing, short-term	Client Hour	3	\$17.50	\$17.50	\$26.58
Nursing, co	ntinuous					
NHx	Nursing, continuous	Day	1	\$464.46	\$464.46	\$705.32
NHx	Nursing, continuous	Day	2	\$290.29	\$290.29	\$440.83
NHx	Nursing, continuous	Day	3	\$232.23	\$232.23	\$352.66
Occupation						
OCT	Occupational Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	1	\$52.80	\$52.80	\$52.80
ОСТ	Occupational Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	2	\$33.00	\$33.00	\$33.00
ОСТ	Occupational Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	3	\$26.40	\$26.40	\$26.40
ОСТ	Occupational Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	1	\$71.50	\$71.50	\$71.50
ОСТ	Occupational Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	2	\$44.69	\$44.69	\$44.69
ОСТ	Occupational Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	3	\$35.75	\$35.75	\$35.75
OCT	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	1	\$57.20	\$57.20	\$57.20
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	2	\$35.75	\$35.75	\$35.75
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	3	\$28.60	\$28.60	\$28.60

Page 13 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	1	\$66.00	\$66.00	\$66.00
OCT	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	2	\$41.25	\$41.25	\$41.25
OCT	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	3	\$33.00	\$33.00	\$33.00
OCT	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	1	\$71.50	\$71.50	\$71.50
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	2	\$44.69	\$44.69	\$44.69
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	3	\$35.75	\$35.75	\$35.75
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	1	\$99.00	\$99.00	\$99.00
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	2	\$61.88	\$61.88	\$61.88
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	3	\$49.50	\$49.50	\$49.50
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	1	\$110.00	\$110.00	\$110.00
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	2	\$68.75	\$68.75	\$68.75
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	3	\$55.00	\$55.00	\$55.00
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	1	\$143.00	\$143.00	\$143.00
OCT	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	2	\$89.38	\$89.38	\$89.38
ОСТ	Occupational Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	3	\$71.50	\$71.50	\$71.50
OCE	Occupational Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	1	\$117.00	\$117.00	\$117.00
OCE	Occupational Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	2	\$73.13	\$73.13	\$73.13
OCE	Occupational Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	3	\$58.50	\$58.50	\$58.50
OCE	Occupational Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	1	\$150.00	\$150.00	\$150.00
OCE	Occupational Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	2	\$93.75	\$93.75	\$93.75
OCE	Occupational Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	3	\$75.00	\$75.00	\$75.00

Page 14 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
OCE	Occupational Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	1	\$220.00	\$220.00	\$220.00
OCE	Occupational Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	2	\$137.50	\$137.50	\$137.50
OCE	Occupational Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	3	\$110.00	\$110.00	\$110.00
OCE	Occupational Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	1	\$350.00	\$350.00	\$350.00
OCE	Occupational Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	2	\$218.75	\$218.75	\$218.75
OCE	Occupational Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	3	\$175.00	\$175.00	\$175.00

^{*}NOTE: The rate is calculated per client in relation to the mileage distance from the Therapist's office to the location of the therapy appointment. If a therapist does not maintain office space, the distance is calculated from his/her home to the location of the therapy appointment. The one-way travel milieage to the appointment is used to determine the rate.

Physical Therapy

PHT	Physical Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	1
PHT	Physical Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	2
PHT	Physical Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	3
PHT	Physical Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	1
PHT	Physical Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	2
PHT	Physical Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	3
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	1
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	2
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	3

\$52.80	\$52.80	\$52.80
\$33.00	\$33.00	\$33.00
\$26.40	\$26.40	\$26.40
\$71.50	\$71.50	\$71.50
\$44.69	\$44.69	\$44.69
\$35.75	\$35.75	\$35.75
\$57.20	\$57.20	\$57.20
\$35.75	\$35.75	\$35.75
\$28.60	\$28.60	\$28.60

Page 15 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	1	\$66.00	\$66.00	\$66.00
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	2	\$41.25	\$41.25	\$41.25
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	3	\$33.00	\$33.00	\$33.00
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	1	\$71.50	\$71.50	\$71.50
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	2	\$44.69	\$44.69	\$44.69
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	3	\$35.75	\$35.75	\$35.75
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	1	\$99.00	\$99.00	\$99.00
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	2	\$61.88	\$61.88	\$61.88
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	3	\$49.50	\$49.50	\$49.50
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	1	\$110.00	\$110.00	\$110.00
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	2	\$68.75	\$68.75	\$68.75
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	3	\$55.00	\$55.00	\$55.00
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	1	\$143.00	\$143.00	\$143.00
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	2	\$89.38	\$89.38	\$89.38
PHT	Physical Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	3	\$71.50	\$71.50	\$71.50
PHE	Physical Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	1	\$117.00	\$117.00	\$117.00
PHE	Physical Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	2	\$73.13	\$73.13	\$73.13
PHE	Physical Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	3	\$58.50	\$58.50	\$58.50
PHE	Physical Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	1	\$150.00	\$150.00	\$150.00
PHE	Physical Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	2	\$93.75	\$93.75	\$93.75
PHE	Physical Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	3	\$75.00	\$75.00	\$75.00

Page 16 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
PHE	Physical Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	1	\$220.00	\$220.00	\$220.00
PHE	Physical Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	2	\$137.50	\$137.50	\$137.50
PHE	Physical Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	3	\$110.00	\$110.00	\$110.00
PHE	Physical Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	1	\$350.00	\$350.00	\$350.00
PHE	Physical Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	2	\$218.75	\$218.75	\$218.75
PHE	Physical Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	3	\$175.00	\$175.00	\$175.00

^{*}NOTE: The rate is calculated per client in relation to the mileage distance from the Therapist's office to the location of the therapy appointment. If a therapist does not maintain office space, the distance is calculated from his/her home to the location of the therapy appointment. The one-way travel milieage to the appointment is used to determine the rate.

Speech Therapy

SPT	Speech Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	1
SPT	Speech Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	2
SPT	Speech Therapy/Early Intervention - In Office Or Center Based Service Delivery	Client Hour	3
SPT	Speech Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	1
SPT	Speech Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	2
SPT	Speech Therapy/Early Intervention - Service Delivered At The Arizona Training Program At Coolidge	Client Hour	3
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	1
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	2
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Less Than 30 Miles*	Client Hour	3

\$52.80	\$52.80	\$52.80
\$33.00	\$33.00	\$33.00
\$26.40	\$26.40	\$26.40
\$71.50	\$71.50	\$71.50
\$44.69	\$44.69	\$44.69
\$35.75	\$35.75	\$35.75
\$57.20	\$57.20	\$57.20
\$35.75	\$35.75	\$35.75
\$28.60	\$28.60	\$28.60

Page 17 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	1	\$66.00	\$66.00	\$66.00
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	2	\$41.25	\$41.25	\$41.25
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 31 To 50 Miles*	Client Hour	3	\$33.00	\$33.00	\$33.00
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	1	\$71.50	\$71.50	\$71.50
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	2	\$44.69	\$44.69	\$44.69
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 51 To 60 Miles*	Client Hour	3	\$35.75	\$35.75	\$35.75
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	1	\$99.00	\$99.00	\$99.00
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	2	\$61.88	\$61.88	\$61.88
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 61 To 120 Miles*	Client Hour	3	\$49.50	\$49.50	\$49.50
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	1	\$110.00	\$110.00	\$110.00
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	2	\$68.75	\$68.75	\$68.75
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of 121 To 150 Miles*	Client Hour	3	\$55.00	\$55.00	\$55.00
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	1	\$143.00	\$143.00	\$143.00
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	2	\$89.38	\$89.38	\$89.38
SPT	Speech Therapy/Early Intervention - Service Delivery Requiring Travel Of More Than 150 Miles*	Client Hour	3	\$71.50	\$71.50	\$71.50
SPE	Speech Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	1	\$117.00	\$117.00	\$117.00
SPE	Speech Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	2	\$73.13	\$73.13	\$73.13
SPE	Speech Therapy Evaluation - <= 2 Hours Of Therapist's Time Including Travel	Evaluation	3	\$58.50	\$58.50	\$58.50
SPE	Speech Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	1	\$150.00	\$150.00	\$150.00
SPE	Speech Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	2	\$93.75	\$93.75	\$93.75
SPE	Speech Therapy Evaluation - 2 - 3 Hours Of Therapist's Time Including Travel	Evaluation	3	\$75.00	\$75.00	\$75.00

Page 18 of 21 April 7, 2003

Service Code	Description	Unit of Service	Multiple Clients	If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
SPE	Speech Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	1	\$220.00	\$220.00	\$220.00
SPE	Speech Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	2	\$137.50	\$137.50	\$137.50
SPE	Speech Therapy Evaluation - 3 - 4 Hours Of Therapist's Time Including Travel	Evaluation	3	\$110.00	\$110.00	\$110.00
SPE	Speech Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	1	\$350.00	\$350.00	\$350.00
SPE	Speech Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	2	\$218.75	\$218.75	\$218.75
SPE	Speech Therapy Evaluation - 4 - 6 Hours Of Therapist's Time Including Travel	Evaluation	3	\$175.00	\$175.00	\$175.00

^{*}NOTE: The rate is calculated per client in relation to the mileage distance from the Therapist's office to the location of the therapy appointment. If a therapist does not maintain office space, the distance is calculated from his/her home to the location of the therapy appointment. The one-way travel milieage to the appointment is used to determine the rate.

The rate is either new or was changed from the January 21, 2003 release

Page 19 of 21 April 7, 2003

Rates

- 1. There will be no average rate determined, in as much as the step-up, step-down, and adopted rate are all equal.
- 2. Separate urban and rural rates and procedure codes are established for transportation services. Except for "Flat Trip Rate for Regularly Scheduled Daily Transportation," urban transports are those that originate within the Phoenix and Tucson metropolitan areas. All other transports that are not "Flat Trip Rate for Regularly Scheduled Daily Transportation" are defined as rural.
- 3. The "Flat Trip Rate for Regularly Scheduled Daily Transportation" rate can only be used, and shall be the only rate used, for transportation of a consumer to a day treatment program by a Qualified Vendor that is not an independent provider.
- 4. Separate urban and rural rates are established for the "Flat Trip Rate for Regularly Scheduled Daily Transportation." The Qualified Vendor shall bill the Division the rural rate only after it receives authorization from the DDD Program Administrator/Manager or designee. The general guideline for authorizing the rural "Flat Trip Rate for Regularly Scheduled Daily Transportation" rate for rural areas is that the potential Day Treatment and Training client base of the program size has fewer than 20 consumers in a 40 mile radius.

Unit of Service

- 1. One unit of service equals one trip per person one way, one mile of traveled distance, or 30 minutes of waiting time.
- 2. Mileage reimbursement is limited to loaded mileage. Loaded mileage is the distance traveled, measured in statute miles, while a consumer is on board and being transported.

Service Code	Description	Urban / Rural	Unit of Service		If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)		
AHCCCS Non-Emergency Ground Transportation Services FFS Rates									
TRA	Ambulatory van	Urban	Base rate		\$6.69	\$6.69	\$6.69		
TRA	Ambulatory van	Rural	Base rate		\$7.69	\$7.69	\$7.69		
TRA	Ambulatory van	Urban	Per mile		\$1.15	\$1.15	\$1.15		
TRA	Ambulatory van	Rural	Per mile		\$1.34	\$1.34	\$1.34		
TRA	Wheelchair van	Urban	Base rate		\$13.94	\$13.94	\$13.94		
TRA	Wheelchair van	Rural	Base rate		\$16.03	\$16.03	\$16.03		
TRA	Wheelchair van	Urban	Per mile		\$1.05	\$1.05	\$1.05		
TRA	Wheelchair van	Rural	Per mile		\$1.20	\$1.20	\$1.20		
TRA	Stretcher van	Urban	Base rate		\$44.59	\$44.59	\$44.59		
TRA	Stretcher van	Rural	Base rate		\$51.28	\$51.28	\$51.28		
TRA	Stretcher van	Urban	Per mile		\$2.10	\$2.10	\$2.10		
TRA	Stretcher van	Rural	Per mile		\$2.42	\$2.42	\$2.42		
TRA	Taxicab	Urban	Base rate		\$1.11	\$1.11	\$1.11		
TRA	Taxicab	Rural	Base rate		\$1.11	\$1.11	\$1.11		
TRA	Taxicab	Urban	Per mile		\$1.05	\$1.05	\$1.05		
TRA	Taxicab	Rural	Per mile		\$1.05	\$1.05	\$1.05		
TRA	Transportation Waiting Time	Urban	30 minutes		\$4.85	\$4.85	\$4.85		
TRA	Transportation Waiting Time	Rural	30 minutes		\$4.85	\$4.85	\$4.85		

Page 20 of 21 April 7, 2003

Service Code	Description	Urban / Rural	Unit of Service		If SFY03 Rate Below This Level, Move to This Level (Step-Up Rate)	Adopted Rate	IF SFY03 Rate Above This Level, Move to This Level (Step- Down Rate)
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Other Transportation Services

TRA	Flat Trip Rate for Regularly Scheduled Daily Transportation	Urban	As of the release of Amendment Number 1, the Division has not completed its review of the Flat Trip Rate for Regularly Scheduled Daily Transportation rates. However, existing providers are encouraged to apply for this service so that payment authorizations can be processed before July 1, 2003. The new rates will be released in a subsequent RFQVA amendment.					
TRA	Flat Trip Rate for Regularly Scheduled Daily Transportation	Rural						
TRA	Transportation Aide	Both	Client Hour		Minimum Wage*	Minimum Wage*	Minimum Wage*	

^{*} As of March 10, 2003, the federal minimum wage for covered nonexempt employees is \$5.15 an hour.

The rate is either new or was changed from the January 21, 2003 release

Page 21 of 21 April 7, 2003